PTC/SB06 (08-03)
Approved for use through 7/31/2008, ONE 0851-0002
U.S. Pakirit and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Approximate S Value Child Control Mumber		
CLAIMS AS FILED - PART (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR MANSER FILE		NUMBER EXTRA		1	RATE	FEE	1	RATE		
BASIC FEE CIT CFR 1.16(a))				·				1	POLIE	A CO
TOTAL CLAIMS					1		-	OR		1220
MODERODENT CLAIMS	ADENT CLAIMS		9. 1.	+		× •	<b>—</b> —	OR	<u> </u>	
(37 CFR 1.16(N)) minus 3			• • •		1	<u> </u>		OR.	X & e	
MULTIPLE DEPENDENT CLAIM PRESENT (57 CFR 1.14(d))					J	+8		OR	+5	
* If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		OR.	TOTAL	220
CLAIMS AS AMENDED - PART II										
86/04/05 (Column 1) (Column			(Column 2)	(Column 3)		SMALL E	NIITY	OR	OTHER	
4 5 & ·	CLAIMS REMAINING AFTER		HIGHEST MUNBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL	}	RATE	ADDI- TIONAL
Yotal ·	AMENDHEIT Zu	Minus	PAIDFOR	0			FEE			FEE
C cr cra s.sayp		Miners	70	./		X 5		OR	× 8=	
Total of cran stage of cran st	ß		3	-/		x 6		<b>OR</b>	X 8	
FRIST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.14(4)						+5		OR	+1	
						TOTAL ADDL PEE		OR	TOTAL ADD'L FEE	
1/30/02										
	CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TICINAL FEE		RATE	ADDI- TIONAL FEE
C CF CFR 1.1943	28	Minus	20	0.0	П	X 3		OR	X1=	
Ch chairman	4	Minus	<b>8</b>	• /	Ш	x 2		OR	X & =	
FIRST PRESENTATION OF MATTPLE DEPENDENT CLAIM (ST CPR 1.1800)						+1		QR	+1	
6-19-06						TOTAL ADD'L FEE		OR	YOTAL ADDL FEE	
	(Column 1)		(Column 2)	(Column 3)						
¥ .	CLAINS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL/ FEE		RATE	ACCI- TIONAL FEE
∑ fold •	28	Minus	••	•/		X 5		OR	X 8	
M total memory and a state of the color of t	.4	Minus		7	Ì	×8•	_/_	CR.	X1•	<del>/</del>
FREST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 GFR 1.1000)						*=		OR		
						TOTAL ADDL FEE		OR	TOTAL ADDL FEE	
If the entry in column 1 is less than the entry in column 2, write "O' in column 3.      If the "Highest Number Provincely Paid For" ON THIS SPACE is less than 20, enter "20",      If the "Highest Number Provincely Paid For" ON THIS SPACE is less than 3, enter "2".      The "Highest Number Provincely Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fits (and by the USP1O to process) an application. Confidentiality is governed by 35 U.SC. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, brakeing gallecting, properting, and estimating the conclused application form to the USP1O. Time will very depending upon the individual case. Any comments on the smooth of time you require to complete this farm endfor suppositions for recording this burnary, chouse be earl to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commission, P.O. Box 1400, Alexandria, V.A. 22313-1430, DO NOT SEND FEES OR COMPLETED PORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1454, Alexandria, V.A. 22313-1430.